

CARLISLE FIRE DEPARTMENT
FIRE ALARM SYSTEM INSTALLATION APPLICATION

1. Complete the attached application form.
2. Attach a check for the fee of **\$ 75.00**
payable to “ TOWN OF CARLISLE ”
3. Submit information in accordance with 527 CMR
24.05, 24.06 & 25.07. (floor plan, fire protection devices,
equipment and systems)
4. Provide contact information below. **IMPORTANT !**
5. Leave completed application and fee in FIRE DEPT. mailbox
here at Town Hall or mail to :
Carlisle Fire Dept. , P.O. Box 575, Carlisle, MA 01741-0575.

Contact Information:

Name: _____

Company Name: _____

Address: _____

Telephone: _____

Address of Installation: _____

The above information must be provided and approval granted (CMR 527, 24.04) prior to beginning installation of the detectors.

Conformance with CMR 527, 24.09 (2) is required (test, acceptance & final approval). In addition, an electrical permit for installation of the system (wiring) must be obtained from the Building Commissioners office at Town Hall.

NOTE: Identification numbers are required on the dwelling in accordance with MGL Chapter 148, Sect. 59. All inspections are subject to conformance with this law.

Carbon Monoxide detection must be in place in accordance with State Regulations.

FIRE PREVENTION OFFICE
978-287-0072